



Activity Details / Narrative	<div data-bbox="138 787 606 1554"> <p>General Process Notes</p> <ul style="list-style-type: none"> This business process includes 4 separate and distinct components; (a) Data structure setup (creating the data infrastructure and formatting to support incoming data), (b) Data retrieval setup (creating infrastructure and formatting for timely reporting of requested data summaries), (c) Data collection (acquiring and storing data for public health purposes) and (d) Data quality management (ensuring the data are accurate, complete, etc.) The functional roles for this business process are usually carried out in the public health department and its extended IT entity. More than one role may be handled by the same person in some cases and a task may be handled by more than one role. The set of activities may occur in parallel rather than serially. Public Health Data is considered to be any data and/or information related to clinical, demographic, access factors. This can also include socio-economic data. Generally, public health data may exist as any individual or population based data that is useful to and for public health practice. <p>1. Determine Data Structure Requirements</p> <ul style="list-style-type: none"> The Chronic Disease Program describes data needed, sources of data, and sources of standardized codes (code sets) for the data. The Chronic Disease Program will estimate the number of records and frequency and mechanism for updates. </div> <div data-bbox="606 787 1074 1554"> <p>2. Develop Database System</p> <ul style="list-style-type: none"> Create specifications for data types & formats. Apply standard vocabulary sets. Determine data relationships. Create database & data dictionary. <p>3. Determine Data Retrieval Requirements</p> <ul style="list-style-type: none"> The Chronic Disease Program will identify any preexisting reporting or other data retrieval requirements that may impact the data. The program staff & data manager will determine the types of analysis to perform on the data, which parts are to be kept confidential, and what types of reports will result from the analysis. The manner (i.e. levels of summarization, format, periodicity and automation) in which data will be retrieved from tables and table linkages, stored in datamarts and reported is chosen and described. <p>4. Identify & Acquire Access to Data</p> <ul style="list-style-type: none"> The Chronic Disease Program will identify the primary & secondary data required and acquire access to their sources. <p>5. Develop Data Retrieval System</p> <ul style="list-style-type: none"> Create datamart(s) for summarization, format, periodicity and automation of public health data. Perform external linkages as needed (e.g. geo-coding, Medicaid, etc.). Filter data for reporting (e.g. de-identification, geo area, eligibilities, etc.) Create interactive reporting templates & tools. </div> <div data-bbox="1074 787 1585 1554"> <p>6. Maintain Quality of Data</p> <ul style="list-style-type: none"> The data parameters are defined and described in a data dictionary. Descriptions include data field names (attributes), allowable values within the data field, data field type (string, Boolean, numeric), data validation rules, etc. Setup data validation rules to automatically check whether data is within predefined limits and format when it is entered. Assign unique identifiers to each data record so they can be catalogued and categorized as distinct entries. <p>7. Maintain Database Integrity and Confidentiality</p> <ul style="list-style-type: none"> Specify the set of database structure operations that can be performed on the data, and their limits. Users of the data are granted varying levels of access, depending on their roles and security clearance for the data. <p>8. Maintain Integrity of Database Links</p> <ul style="list-style-type: none"> The data matching parameters are defined between databases. Sharing agreements and methods for notification of changes are instituted. <p>9. Data Collection</p> <ul style="list-style-type: none"> Data Collection involves the ongoing identification and gathering of public health data. </div> <div data-bbox="1585 787 2047 1554"> <p>10. Data Validation</p> <ul style="list-style-type: none"> Routinely the data is checked for accuracy by program staff and the data manager. Implement rules to automatically check whether data is within predefined limits and format when it is entered, as well as unduplicated. Validation checks may include value ranges, way information is recorded (i.e. numbers and not words), etc. <p>11. Data Accurate?</p> <ul style="list-style-type: none"> If data has been identified as inaccurate, it is listed or tagged for correction. <p>12. Cleanse Data</p> <ul style="list-style-type: none"> Data cleansing involves the purging and or restoration of data and links identified as inaccurate, etc. <p>13. Need Additional Data/Reporting?</p> <ul style="list-style-type: none"> Periodically the data requirements change or need to be updated, or retrieval requirements change. </div>
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